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CONFIRMATION NO. 4578

<b>SERIAL NUMBER</b> 10/726,093	<b>FILING OR 371(c) DATE</b> 12/01/2003 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1643	<b>ATTORNEY DOCKET NO.</b> 50218/002004
<b>APPLICANTS</b> Fahri Saatcioglu, Oslo, NORWAY;				
<b>** CONTINUING DATA *****</b> This application is a CON of 09/743,682 01/10/2001 ABN which is a 371 of PCT/IB00/00673 05/19/2000 which claims benefit of 60/135,325 05/20/1999 and claims benefit of 60/135,333 05/20/1999 <i>SR</i>				
<b>** FOREIGN APPLICATIONS *****</b> <i>SR</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **</b> <b>** 12/02/2004</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance <i>SR</i> Verified and Acknowledged <i>SR</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> NORWAY	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 14
				<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> 21559				
<b>TITLE</b> Differentially expressed genes in prostate cancer				
<b>FILING FEE RECEIVED</b> 385	<b>FEES:</b> Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	